UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address: COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450 www.uspto.gov

NOTICE OF ALLOWANCE AND FEE(S) DUE

24505

7590

DANIEL J SWIRSKY PO BOX 2345 BEIT SHEMESH, 99544 **ISRAEL**

03/22/2005

EXAMINER BAYARD, EMMANUEL

ART UNIT PAPER NUMBER

DATE MAILED: 03/22/2005

2631

| 1 | APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|---|-----------------|-------------|----------------------|---------------------|------------------|
| | 09/599 405 | 06/22/2000 | ROMAN VITENBERG | 106544 | 7727 |

TITLE OF INVENTION: MULTIPOINT DIGITAL SUBSCRIBER LINES WITH HOME DATA NETWORK ABILITY

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | YES | \$700 | \$0 | \$700 | 06/22/2005 |

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. PROSECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE REFLECTS A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE APPLIED IN THIS APPLICATION. THE PTOL-85B (OR AN EQUIVALENT) MUST BE RETURNED WITHIN THIS PERIOD EVEN IF NO FEE IS DUE OR THE APPLICATION WILL BE REGARDED AS ABANDONED.

HOW TO REPLY TO THIS NOTICE:

I. Review the SMALL ENTITY status shown above.

If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

- A. If the status is the same, pay the TOTAL FEE(S) DUE shown
- B. If the status above is to be removed, check box 5b on Part B -Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above, or

If the SMALL ENTITY is shown as NO:

- A. Pay TOTAL FEE(S) DUE shown above, or
- B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check box 5a on Part B - Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and 1/2 the ISSUE FEE shown above.
- II. PART B FEE(S) TRANSMITTAL should be completed and returned to the United States Patent and Trademark Office (USPTO) with your ISSUE FEE and PUBLICATION FEE (if required). Even if the fee(s) have already been paid, Part B - Fee(s) Transmittal should be completed and returned. If you are charging the fee(s) to your deposit account, section "4b" of Part B - Fee(s) Transmittal should be completed and an extra copy of the form should be submitted.
- III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

IMPORTANT REMINDER: Utility patents issuing on applications filed on or after Dec. 12, 1980 may require payment of maintenance fees. It is patentee's responsibility to ensure timely payment of maintenance fees when due.

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

| CAMBERT CORRESPINSONMER. ACROSSES (Name. Luc Blook 1 for any change of saderess) | indicated unless corrected maintenance fee notification | below or directed otherwise is. | in Block 1, by (a) |) specifying a 1 | new co | rrespondence address | s; and/or (b) indicating a sepa | rate "FEE ADDRESS" for |
|---|---|--|--------------------------------------|--|-----------------------|--|--|---|
| DANIEL J SWIRSKY PO BOX 2345 BEIT SHEMESH, 99544 ISRAEL Comparison of the part of the p | | | any change of address) | • | | Note: A certificate of | f mailing can only be used for | or domestic mailings of the |
| DANIEL J SWIRSKY PO BOX 2345 BEIT SHEMESH, 99544 ISRAEL Comparison of the part of the p | | | | | | Fee(s) Transmittal. T papers. Each addition | his certificate cannot be used to al paper, such as an assignment | for any other accompanying ent or formal drawing, must |
| PO BOX 2345 BETT SHEMESH, 99544 ISRAEL Composition of the Compositi | | | | | l | have its own certifica | te of mailing or transmission. | |
| APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/599,405 06/22/2000 ROMAN VITENBERG 106544 7727 TITLE OF INVENTION: MULTIPOINT DIGITAL SUBSCRIBER LINES WITH HOME DATA NETWORK ABILITY APPLN TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$700 \$0 \$5700 06/22/2005 EXAMINER ART UNIT CLASS-SUBCLASS BAYARD, EMMANUEL 261 375-222000 1. Change of correspondence address (or Change of Correspondence Address from F10/SB/12) attained: A contract of the contract of | | RSKY | | | | Ce | rtificate of Mailing or Trans | mission |
| APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/599,405 06/22/2000 ROMAN VITENBERG 106544 7727 TITLE OF INVENTION: MULTIPOINT DIGITAL SUBSCRIBER LINES WITH HOME DATA NETWORK ABILITY APPLN TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$700 \$0 \$5700 06/22/2005 EXAMINER ART UNIT CLASS-SUBCLASS BAYARD, EMMANUEL 261 375-222000 1. Change of correspondence address (or Change of Correspondence Address from F10/SB/12) attained: A contract of the contract of | | | | | | i nereby certify that t States Postal Service | with sufficient postage for fir | g deposited with the United st class mail in an envelope |
| APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/599,405 06/22/2000 ROMAN VITENBERG 106544 7727 TITLE OF INVENTION: MULTIPOINT DIGITAL SUBSCRIBER LINES WITH HOME DATA NETWORK ABILITY APPLN TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$700 \$0 \$5700 06/22/2005 EXAMINER ART UNIT CLASS-SUBCLASS BAYARD, EMMANUEL 261 375-222000 1. Change of correspondence address (or Change of Correspondence Address from F10/SB/12) attained: A contract of the contract of | - | 99544 | | | : | addressed to the Ma | il Stop ISSUE FEE address | above, or being facsimile |
| APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/599,405 06/22/2000 ROMAN VITENBERG 106544 7727 TITLE OF INVENTION: MULTIPOINT DIGITAL SUBSCRIBER LINES WITH HOME DATA NETWORK ABILITY APPLN TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$700 \$0 \$700 06/22/2005 EXAMINER ART UNIT CLASS-SUBCLASS BAYARD, EMMANUEL 2631 375-22/2000 CRR 1,563, 10 Strong of correspondence address or indication of "Fee Address" (37 CFR 1,563) Change of correspondence address (or Change of Correspondence Address from PTO/SB/12/2) attached. See Address from PTO/SB/12/2) attached. "Fee Address" indication (or Fee Address" indication for more priors from PTO/SB/12/2) attached. "Fee Address" indication of the Address indication for more priors from PTO/SB/12/2) attached. "Fee Address" indication of the Address indication for more priors from PTO/SB/12/2) attached. "PER ADDRESS indication of the Address indication for more priors from PTO/SB/12/2) attached. "PER ADDRESS indication of the Address indication for more priors from PTO/SB/12/2) attached. "PER ADDRESS indication of the Address indication for more priors from PTO/SB/12/2) attached. "PER ADDRESS in Indication for the Address indication for more priors from PTO/SB/12/2) attached. "PER ADDRESS in Indication for the PTO/SB/12/2) attached. "PER ADDRESS in Indication for the PTO/SB/12/2) attached. "ADDRESS in The Address in Indication for more priors in PTO/SB/12/2) attached. "ADDRESS in The ADDRESS in Indication for more priors in PTO/SB/12/2) attached. "ADDRESS in The ADDRESS in Indication for more priors in PTO/SB/12/2) attached. "ADDRESS in The ADDRESS in Indication for the PTO/SB/12/2 in Indication for more priors in PTO/SB/12/2 in Indication for the | ISRAEL | | | | ĺ | transmitted to the OS | 110 (703) 740-4000, OII tile <u>u</u> | |
| APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. | | | | | | | | |
| 09/599,405 06/22/2000 ROMAN VITENBERG 106544 7727 TITLE OF INVENTION: MULTIPOINT DIGITAL SUBSCRIBER LINES WITH HOME DATA NETWORK ABILITY APPLN TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$700 \$0 \$700 06/22/2005 EXAMINER ART UNIT CLASS-SUBCLASS BAYARD, EMMANUEL 2631 375-22/2000 1. Change of correspondence address or indication of "Fee Address" (37 CFR. 1.63). Address from PTO/SB1/22) stached. 1. Change of correspondence address or indication of "Fee Address" (37 CFR. 1.63). Address from PTO/SB1/22) stached. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLASS NOTE: Unless an assignee is identified below, no assignee data will appear on the patent for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are enclosed: Publication Fee (No small entity discount permitted) Acheck in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Acheck in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Acheck in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Acheck in the amount of the fee(s) is enclosed. Propost Account Number Acheck in the amount of the fee(s) is enclosed. Propost Account Number Acheck in the amount of the fee(s) is enclosed. Propost Account Number Acheck in the amount of the fee(s) is enclosed. Propost Account Number Acheck in the amount of the fee(s) is enclosed. Propost Account Number Acheck in the amount of the fee(s) is enclosed. Propost Account Number Acheck in the amount of the fee(s) is enclosed. Propost Account Number Acheck in the amount of the fee(s) is enclosed. Propost Account Number Acheck in the amount of t | | | | | | | | . (Date) |
| APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$700 \$9 \$700 06/22/2005 EXAMINER ART UNIT CLASS-SUBCLASS BAYARD, EMMANUEL 2631 375-222000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.53). CR 1.53) 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.54). CR 1.53) 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or segment PIO/SB4/12) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government of the fee(s) are enclosed. Plyment by credit card. Form PTO-2038 is attached. Pl | APPLICATION NO. | FILING DATE | | FIRST NAMED I | INVENT | TOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
| APPLN TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$700 \$0 \$700 06/22/2005 EXAMINER ART UNIT CLASS-SUBCLASS BAYARD, EMMANUEL 2631 375-222000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). CRAINER ACT UNIT CLASS-SUBCLASS BAYARD, EMMANUEL 2631 375-222000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.364). CRAINER ACT UNIT CLASS-SUBCLASS BAYARD, EMMANUEL 2631 375-222000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.364). CRAINER ACT UNIT CLASS-SUBCLASS BAYARD, EMMANUEL 2631 375-222000 2. For printing on the patent front page, list (19 the names of up to 3 registered patent attorneys or agents of up to 3 registered patent attorneys or agents. If no name is 3 cracing the patent of the names of up to 3 registered patent attorneys or agents. If no name is 3 cracing the patent of the names of up to 3 registered patent attorneys or agents. If no name is 3 cracing the patent of the names of up to 3 registered patent attorneys or agents. If no name is 3 cracing the patent of the | 09/599,405 | 06/22/2000 | | ROMAN VIT | ENBE | RG | 106544 | 7727 |
| APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$700 \$0 \$700 06/22/2005 EXAMINER ART UNIT CLASS SUBCLASS BAYARD, EMMANUEL 2631 375-22/2000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.353). 1. Change of correspondence address (or Change of Correspondence Address form PTO/SB1/2) attached. 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents. GR alternatively, and the printing of the patent attorneys or agents. GR alternatively, (2) the name of a single firm (having as a member a registered attorney or agents. GR alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents. GR alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents. GR alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents. GR alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents. GR alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents. GR alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents. GR alternatively, (2) the name of up to 3 registered patent attorneys or agents. GR alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents. GR alternatively, (2) the name of up to 3 registered patent attorneys or agents. GR alternatively, (2) the name of up to 3 registered patent attorneys or agents. GR alternatively, (2) the name of up to 3 registered patent attorneys or agents. GR alternatively, (2) the name of up to 3 registered patent attorneys or agents. GR alternatively, (2) the name of up to 3 registered patent attorneys or agents. GR alternatively, (2) the name of up to 3 registered patent attorneys or agents. GR alternatively, (2) the name of up to 4 registered patent | · | UU TIDODIT DICITAL CUI | OCCUIDED I DIE | NUTU HOME | C DAT. | NETWORK ADII I | TV | |
| EXAMINER ART UNIT CLASS-SUBCLASS | ITTLE OF INVENTION: M | IULTIPOINT DIGITAL SUI | SSCRIBER LINES | S WITH HOME | E DATA | A NEI WORK ABILI | 11 | |
| EXAMINER ART UNIT CLASS-SUBCLASS | | | | | | | | |
| EXAMINER ART UNIT CLASS-SUBCLASS | | | | | | | | |
| BAYARD, EMMANUEL 2631 375-222000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563). Change of correspondence address for Change of Correspondence Address form PTO/SB/1/22) attached. Change of correspondence address for Change of Correspondence Address form PTO/SB/1/22) attached. The Eve Address' indication for "Fee Address" Indication form PTO/SB/1/22) attached. The Eve Address' indication for "Fee Address' Indication form Sumber is required. Bayard attached Use of a Customer Number is required. ASSIGNEE BANME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Discussion of the patent of the fee(s) is enclosed. | APPLN. TYPE | SMALL ENTITY | ISSUE FI | EE | PU | BLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
| BAYARD, EMMANUEL 2631 375-222000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.543). 1. Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached. 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 3 registered patent attorneys or agent) and the names of up to 3 registered patent attorneys or agent) and the names of up to 3 registered patent attorneys or agent) and the names of up to a registered attorney or agent) and the names of up to a registered attorney or agent) and the names of up to a registered attorney or agent) and the names of up to a registered attorney or agent) and the names of up to a registered attorney or agent) and the names of up to a registered attorney or agent) and the names of up to a registered attorney or agent) and the names of up to a registered attorney or agent) and the names of up to a registered attorney or agent) and the names of up to a registered attorney or agent) and the names of up to a registered attorney or agent) and the names of up to a registered attorney or agent) and the names of up to a registered attorney or agent) and the names of up to a registered attorney or agent) and the names of up to a registered attorney or agent) and the names of up to a registered attorney or agent) and the names of up to a registered attorney or agent) and the names of up to a registered attorney or agent attorneys or agent of agents and the names of up to a registered attorneys and the names of up to a registered attorneys or agent attorneys or agent or | nonprovisional | YES | \$700 | | | \$0 | \$700 | 06/22/2005 |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.543). Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached. Tee Address from PTO/SB/122) attached. Use of a Customer PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government data. The following fee(s) are enclosed: A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. Payment by credit card. Form PTO-2038 i | EXAM | INER | ART UN | IT | CL | ASS-SUBCLASS |] | |
| CR 1.563). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents) and the names of up to 2 registered patent attorneys or agents. If no name is 1 issed, no name will be printed. 3 ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are enclosed: Date | BAYARD, E | EMMANUEL | 2631 | | | 375-222000 | | |
| Change of correspondence address (or Change of Correspondence Address from F70/SB/122) attached. Change of Correspondence C | 1. Change of correspondence | e address or indication of "Fe | ee Address" (37 | 2. For printing | ng on t | he patent front page, l | ist | |
| Please check the appropriate assignee category or categories (will not be printed on the patent): Section | | lence address (or Change of (| Correspondence | | | | nt attorneys 1 | |
| "Fee Address" indication (or "Fee Address" Indication form PTO/SBAY; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are enclosed: Issue Fee | Address form PTO/SB/1 | 22) attached. | correspondence | _ | | • • | a member a 2 | |
| Number is required. Isted, no name will be printed. | "Fee Address" indica | tion (or "Fee Address" Indica | tion form | registered at | ttorney | or agent) and the nar | nes of up to | |
| PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government da. The following fee(s) are enclosed: Ab. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) A Applicant claims SMALL ENTITY status. See 37 CFR 1.27. D b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party ir interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature | Number is required. | or more recent) attached. Use | of a Customer | listed, no na | me wil | attorneys or agents. It be printed. | no name is 3 | |
| (A) NAME OF ASSIGNEE (B) RESIDENCE; (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are enclosed: Issue Fee | 3. ASSIGNEE NAME AND | RESIDENCE DATA TO B | E PRINTED ON T | HE PATENT (| (print o | r type) | | |
| (A) NAME OF ASSIGNEE (B) RESIDENCE; (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are enclosed: Issue Fee | PLEASE NOTE: Unless recordation as set forth in | an assignee is identified be 37 CFR 3.11. Completion | clow, no assignee of this form is NO | data will appea Γa substitute fo | ar on th or filing | e patent. If an assig an assignment. | nee is identified below, the d | ocument has been filed for |
| Please check the appropriate assignee category or categories (will not be printed on the patent): | | | | | | | | |
| 4b. Payment of Fee(s): Issue Fee | , | | ` | • | ` | | , | |
| 4b. Payment of Fee(s): Issue Fee | | | | | | | | |
| □ Issue Fee □ A check in the amount of the fee(s) is enclosed. □ Publication Fee (No small entity discount permitted) □ Advance Order - # of Copies □ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) □ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature Date | Please check the appropriate | assignee category or category | ries (will not be pr | inted on the pat | tent): | ☐ Individual ☐ C | Corporation or other private gro | oup entity Government |
| Publication Fee (No small entity discount permitted) Advance Order - # of Copies | 4a. The following fee(s) are | enclosed: | 4b | . Payment of Fe | ee(s): | | | |
| Advance Order - # of Copies | ☐ Issue Fee | | | A check in | the am | ount of the fee(s) is e | nclosed. | |
| Advance Order - # of Copies | Publication Fee (No s | mall entity discount permitte | ed) | Payment by | y credit | card. Form PTO-203 | 8 is attached. | |
| 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature | | | | The Direct | tor is h | ereby authorized by | charge the required fee(s), or | credit any overpayment, to |
| a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature | 5 Characta Fada 64 4 | /C / 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | ` | Deposit Accou | unt Nun | nber | (enclose an extra c | opy of this form). |
| The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party ir interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature | _ | | | ☐ b. Applicar | nt is no | longer claiming SMA | ALL ENTITY status. See 37 C | FR 1.27(g)(2). |
| Authorized Signature Date Typed or printed name Registration No | | | | tion Fee (if any) I from anyone of Office. | or to i | re-apply any previous an the applicant; a reg | sly paid issue fee to the applications and attorney or agent; or the | ntion identified above. the assignee or other party in |
| Typed or printed name Registration No | | | | | | | | |
| | _ | | | | | | | |
| | ••• | | | | obtain | _ | | |

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



United States Patent and Trademark Office

UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address: COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450 www.uspto.gov

| APPLICATION N | O. F | ILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. | |
|------------------------------------|------|------------|-------------------------|---------------------|------------------|--|
| 09/599,405 | | 06/22/2000 | ROMAN VITENBERG | 106544 | 7727 | |
| 24505 | 7590 | 03/22/2005 | | EXAM | INER | |
| DANIEL J | | | BAYARD, EMMANUEL | | | |
| PO BOX 2345 BEIT SHEMESH, 99544 | | | ART UNIT | PAPER NUMBER | | |
| ISRAEL | , | | | 2631 | | |
| | | | DATE MAILED: 03/22/2005 | | | |

Determination of Patent Term Adjustment under 35 U.S.C. 154 (b)

(application filed on or after May 29, 2000)

The Patent Term Adjustment to date is 908 day(s). If the issue fee is paid on the date that is three months after the mailing date of this notice and the patent issues on the Tuesday before the date that is 28 weeks (six and a half months) after the mailing date of this notice, the Patent Term Adjustment will be 908 day(s).

If a Continued Prosecution Application (CPA) was filed in the above-identified application, the filing date that determines Patent Term Adjustment is the filing date of the most recent CPA.

Applicant will be able to obtain more detailed information by accessing the Patent Application Information Retrieval (PAIR) WEB site (http://pair.uspto.gov).

Any questions regarding the Patent Term Extension or Adjustment determination should be directed to the Office of Patent Legal Administration at (571) 272-7702. Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at (703) 305-8283.